

Form MVR-18

For assistance, call (804)367-8037

Motor Vehicle Repair Labor & Services TaxP. O. Box 26179
Richmond, VA 23260-6179

| | |
|------------------|--------------------------------|
| Name | Account Number |
| Address | Period February 2008 |
| City, State, ZIP | Due Date May 6, 2008 |

| Locality Name | Locality Code | A. Enter Gross Repair Charges | B. Enter Exempt Repair Charges & Deductions | C. Taxable Charges (Column A - Column B) |
|--|---------------|-------------------------------|---|--|
| Line 1 - Northern Virginia Transportation Authority | | | | |
| Alexandria | 51510 | | | |
| Arlington | 51013 | | | |
| Fairfax City | 51600 | | | |
| Fairfax County | 51059 | | | |
| Falls Church | 51610 | | | |
| Loudoun | 51107 | | | |
| Manassas | 51683 | | | |
| Manassas Park | 51685 | | | |
| Prince William | 51153 | | | |
| Totals Northern Virginia | | 1A. | 1B. | 1C. |

| | | | | |
|--|-------|-----|-----|-----|
| Line 2 - Hampton Roads Transportation Authority | | | | |
| Chesapeake | 51550 | | | |
| Hampton | 51650 | | | |
| Isle of Wight | 51093 | | | |
| James City | 51095 | | | |
| Newport News | 51700 | | | |
| Norfolk | 51710 | | | |
| Poquoson | 51735 | | | |
| Portsmouth | 51740 | | | |
| Suffolk | 51800 | | | |
| Virginia Beach | 51810 | | | |
| Williamsburg | 51830 | | | |
| York | 51199 | | | |
| Totals Hampton Roads | | 2A. | 2B. | 2C. |

- 3 Total Taxable Charges** Add Line 1C and Line 2C.....
- 4 Tax** Multiply Line 3 by 5% (.05)
- 5 Penalty** for Late Filing (see instructions)
- 6 Interest** for Late Filing (see instructions)
- 7 Total Amount Due** Add lines 4, 5 and 6. Enter on Form MVR-18V, on Page 2.....

I declare that this return (including accompanying schedules and statements) has been examined by me and to the best of my knowledge and belief is true, correct and complete.

Taxpayer Signature

Date

Phone Number

COMPLETE AND RETURN FORM MVR-18V WITH FORM MVR-18

Form MVR -18V
(Doc ID 218)

Motor Vehicle Repair Labor & Services Tax Return

| | |
|--------------------------------|--------------------------------|
| Period February 2008 | Due Date May 6, 2008 |
|--------------------------------|--------------------------------|

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| |
|------------------|
| Account Number |
| Name |
| Address |
| Address |
| City, State, ZIP |

Total Amount Due (Line 7 of Form MVR-18.)

Enclose this voucher and your check with your return.

EFT not yet available.